

CAED 435 (Rev. 1/14)		United States District Court, Eastern District of California		Case 1:21-cr-00022-NONE-SKO Document 23 Filed 05/11/21 Page 1 of 1		FOR COURT USE ONLY	
You must provide the name of the Reporter.				TRANSCRIPT ORDER		DUE DATE:	
1. NAME Brian Enos		2. EMAIL brian.enos@usdoj.gov		3. PHONE NUMBER 559/497-4000		4. DATE 5-11-2021	
5. MAILING ADDRESS 2500 Tulare Street Suite 4400				6. CITY Fresno		7. STATE CA	
9. CASE NUMBER 1:21-cr-00022-NONE-SKO		10. JUDGE SKO		DATES OF PROCEEDINGS			
				11. FROM 2-25-2021		12. TO 4-30-2021	
13. CASE NAME US v Nathan Larson				LOCATION OF PROCEEDINGS			
				14. CITY Fresno		15. STATE CA	
16. ORDER FOR							
<input type="checkbox"/> APPEAL		<input checked="" type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT		<input type="checkbox"/> BANKRUPTCY	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER (<i>Specify</i>)	
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)							
PORTION(S)		DATE(S)		REPORTER			
<input type="checkbox"/> VOIR DIRE						<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> ENTIRE TRIAL							
<input type="checkbox"/> SENTENCING				Status Conference		4-30-2021 K. Hooven	
<input type="checkbox"/> MOTION HEARING				<input checked="" type="checkbox"/> OTHER (Specify)			
<input type="checkbox"/> STATUS HEARING				Arraignment and Detention Hearing		2-25-2021 K. Hooven	
<input type="checkbox"/> CHANGE OF PLEA				Status Conference		4-21-2021 K. Hooven	
<input type="checkbox"/> PRE-TRIAL PROCEEDING				Commencement of Faretta Hearing		4-28-2021 K. Bennett	
18. ORDER							
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS	
ORDINARY	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES				
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>					
CERTIFICATION (19 & 20) By signing below, I certify I will pay all charges (deposit plus additional).				ESTIMATE TOTAL			
19. SIGNATURE /s/ Brian W. Enos				PROCESSED BY			
20. DATE 5-11-2021				PHONE NUMBER			
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS			
		DATE	BY				
ORDER RECEIVED							
DEPOSIT PAID				DEPOSIT PAID			
TRANSCRIPT ORDERED				TOTAL CHARGES			
TRANSCRIPT RECEIVED				LESS DEPOSIT			
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT				TOTAL DUE			